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APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
09/691,690	10/18/2000	Mats A. Brenner	A13-26546

000128  
HONEYWELL INTERNATIONAL INC.  
101 COLUMBIA ROAD  
P O BOX 2245  
MORRISTOWN, NJ 07962-2245

FORMALITIES LETTER



\*OC000000005617032\*

Date Mailed: 12/13/2000

**NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION**

**FILED UNDER 37 CFR 1.53(b)**

***Filing Date Granted***

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given TWO MONTHS from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The oath or declaration is missing.  
*A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.*
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(e) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.
- The balance due by applicant is \$ 130.

*A copy of this notice **MUST** be returned with the reply.*

  
Customer Service Center

Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE

01/25/2001 CVDRACHA 00000105 011125 09691690

01 FC:105 130.00 CH

Please type a plus sign (+) inside this box →

PTO/SB/21 (10-96)

Approved for use through 10/31/99. OMB 0651-0031

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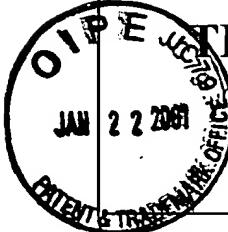
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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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## TRANSMITTAL FORM

To be used for all correspondence after initial filing)

Total Number of Pages in This Submission

9

Application Number	09/691,690
Filing Date	October 18, 2000
First Named Inventor	Mats A. Brenner
Group Art Unit	TBD
Examiner Name	TBD
Docket Number	A13-26546US

### ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input checked="" type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input checked="" type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Checklist and Accompanying Petition <input type="checkbox"/> To Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> After Allowance Communication to group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below):  <input type="checkbox"/> Executed Declaration and Power of Attorney, Assignment Recordation Form
Remarks		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Kris T. Fredrick
Signature	
Date	1/19/01

### CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope  
address to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date:

Type or printed name	Karen Houle		
Signature	Karen Houle	Date	1-19-01

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents Box Patent Application, Washington, DC 20231.

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**FEE TRANSMITTAL**  
**For FY 2000**

JAN 22 2001

**COMPLETE IF KNOWN**

Patent fees are subject to annual revision.

Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12. See 37 C.F.R. §§1.27 and 1.28.

**TOTAL AMOUNT OF PAYMENT \$130.00**

Application No.	09/691,690
Filing Date	October 18, 2000
First Named Inventor	Mats A. Brenner
Group Art Unit	TBD
Examiner Name	TBD
Attorney Docket No.	A13-26546US

<b>METHOD OF PAYMENT (check one)</b>					
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:					
Deposit Account Number	01-1125				
Deposit Account Name					
Charge any Additional Fee Required <input checked="" type="checkbox"/> Under 37 CFR §§1.16 & 1.17					
2. <input type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other					
<b>FEE CALCULATION</b>					
1. <b>BASIC FILING FEE</b>					
Large Entity	Small Entity				
Fee Code	Fee Code	Fee Description	Fee Paid		
101	710	201	355	Utility Filing Fee	\$
106	320	206	160	Design Filing Fee	
107	490	207	245	Plant Filing Fee	
108	710	208	355	Reissue Filing Fee	
114	150	214	75	Provisional Filing Fee	
SUBTOTAL (1)		\$0			

**3. ADDITIONAL FEES**

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee Code	Fee Description	Fee Paid
105	130	205	65
127	50	227	25
139	130	139	130
147	2,520	147	2,520
112	920*	112	920*
113	1,840*	113	1,840*
115	110	215	55
116	390	216	195
117	890	217	445
118	1,390	218	695
128	1,890	228	945
119	310	219	155
120	310	220	155
121	270	221	135
138	1,510	138	1,510
140	110	240	55
141	1,240	241	620
142	1,240	242	620
143	440	243	220
144	600	244	300
122	130	122	130
123	50	123	50
126	240	126	240
581	40	581	40
146	710	246	355
149	710	249	355
Other fee (specify)			
Other fee (specify)			
* Reduced by Basic Filing Fee Paid		SUBTOTAL (3)	\$130.00

<b>2. EXTRA CLAIM FEES</b>				
Large Entity	Small Entity			
Fee Code	Fee Code	Fee Description		
103	18	203	9	Claims in excess of 20
102	80	202	40	Independent claims in excess of 3
104	270	204	135	Multiple dependent claim
109	80	209	40	Reissue independent claims over original patent
110	18	210	9	Reissue claims in excess of 20 and over original patent
SUBTOTAL (2)		\$0		

<b>SUBMITTED BY</b>		<b>COMPLETE IF APPLICABLE</b>	
Typed or Printed Name	Kris T. Fredrick		Registration Number
Signature	Kris T. Fredrick	Date	1/19/01
		Deposit Account User ID	01-1125

**WARNING:**

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